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Medical Command

**INSTALLATION HEALTH PROMOTION
PROGRAM (HPP)**

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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This instruction implements AFPD 40-1, *Health Promotion*, and gives requirements for operating, managing, and evaluating an installation HPP. It applies to all Air Force members, retirees, beneficiaries and Air Force civilian personnel. It also applies to all assigned, attached, and associate organizations on Elmendorf AFB. It's used in conjunction with Department of Defense (DoD) Directive 1010.10, *Health Promotion*, March 11, 1986, with Changes 1 and 2; DoD Instruction 1010.15, *Smoke-Free Workplace*, March 7, 1994; and Healthy People 2000: DoD Health Promotion and Disease Prevention Objectives, May 1, 1992, AFI 36-3009, AFI 40-102, *Tobacco Use in the Air Force*; AFI 40-104, *Nutrition Education*; AFI 40-501, *Air Force Fitness Program (AFFP)*; AFI 40-502, *The Weight Management Program (WMP)*; AFI 44-153, *Suicide Prevention Education and Community Training*, and HQ PACAF Programming Plan 96-03, *Establishing Health and Wellness Centers (HAWC) in PACAF*. This publications does not apply to the US Air Force Reserve and Air National Guard units and members The use of the name or mark of any specific manufacturer, commercial product, commodity, or service in this publication does not imply endorsement by the Air Force.

SUMMARY OF REVISIONS

This document is substantially revised and must be completely reviewed.

- 1. Philosophy.** By accepting responsibility for personal health impacting behaviors, individuals can improve their health, performance and quality of life.
- 2. Mission Statement.** The mission of the installation HPP is to increase military readiness and productivity, enhance morale, and reduce medical expenditures by facilitating an environment whereby individuals acquire knowledge and skills that promote and encourage healthy lifestyle behaviors and put them into action.

3. Objectives:

- 3.1. Provide opportunities for individuals to assess their health risks, improve their knowledge, and obtain behavior change interventions of lifestyle choices which impact health.
- 3.2. Ensure cooperation among all base agencies impacting on the health and well being of the Elmendorf AFB community.
- 3.3. Improve individual and family health through emphasis on personal responsibility and heightened awareness of healthy lifestyle choices.
- 3.4. Provide an environment which enhances healthy lifestyles.
- 3.5. Supply the Installation Commander with quantitative information on health trends of installation personnel.
- 3.6. Expand individual accessibility to health information.

4. Assigned Responsibilities:

- 4.1. The 3rd Wing Commander (3WG/CC) . 3 WG/CC, as Installation Commander, will:
 - 4.1.1. Formally appoint a medical service officer or equivalent grade civilian as the installation health promotion manager (HPM) on the recommendation of the 3rd Medical Group Commander (3 MDG/CC).
 - 4.1.2. Provide leadership and emphasis to the Installation HPM through restricting tobacco use, ensuring healthy food options, encouraging physical fitness, and creating a healthy work environment.
 - 4.1.3. Formally designate the chairperson of the Installation HPP Working Group.
 - 4.1.4. Appoint, in writing, representatives to serve on the installation HPP Working Group. Review working group meeting minutes and quarterly health promotion activities reports.
 - 4.1.5. Meet at least semiannually with 3 MDG/CC and the installation HPM to keep current on the HPP focus and initiative.
 - 4.1.6. In collaboration with 3 MDG/CC, ensure sufficient resources, to include a separate budget, administrative support, and office space, for the Installation HPM.
 - 4.1.7. Ensure all unit commanders appoint, in writing, an organization coordinator for Health and Fitness activities.
- 4.2. The 3rd Medical Group Commander (3rd MDG/CC). 3 MDG/CC will:
 - 4.2.1. Integrate the HPP into the health care delivery system.
 - 4.2.2. Nominate to 3 WG/CC a medical service officer or civilian equivalent who will serve as installation HPM.
 - 4.2.3. Assign, in writing, a health care provider to advise the Installation HPM on clinical preventive medicine issues and to provide medical expertise and guidance.
 - 4.2.4. Review and approve quarterly health promotion activities reports and HPP working group meeting minutes forwarded by the installation HPM.

- 4.3. The 3rd Aerospace Medicine Squadron Commander (3 AMDS/CC). The 3 AMDS/CC will:
 - 4.3.1. Approve the installation HPM job description.
 - 4.3.2. Review and approve quarterly health promotion activities reports and HHP working group meeting minutes forwarded by the installation HPM.
- 4.4. Installation Health Promotion Manager (HPM) (3 AMDS/SGPZ). The installation HPM will:
 - 4.4.1. Serve as co-chairperson of the Installation HPP Working Group.
 - 4.4.2. Work closely with installation agencies to schedule, coordinate, conduct, and evaluate presentations on the HPP.
 - 4.4.3. Report to the 3rd Aerospace Medicine Squadron Commander (3 AMDS/CC) on HPP activities.
 - 4.4.4. Develop specific annual HPP goals and objectives aligned with Pacific Air Forces (PACAF) HPP goals and objectives, using inputs from 3WG/CC, 3MG/CC, and the installation HPP Working Group.
 - 4.4.5. Develop a budget to procure needed HPP materials based on catchment area population.
 - 4.4.6. Publish health promotion activities and articles in local media sources.
 - 4.4.7. Report HPP activities conducted on a quarterly basis in the HPP activities report to the PACAF Health Promotion Director (HPD) (HQ PACAF/SGP).
 - 4.4.8. Serve as focal point between base agencies and local health programs to establish goals and objectives leading to enhanced healthy lifestyles for the military community.
 - 4.4.9. Maintain installation HPP files.
 - 4.4.10. Develop operating instructions and policies to establish guidelines for ensuring program continuity during transition of the Installation HPM.
 - 4.4.11. Attend the annual US Air Force Worldwide Health Promotion managers' Workshop.
 - 4.4.12. Manage health screenings and the administration of health risk appraisals to ensure proper techniques and follow-ups. Screenings should be conducted during duty hours at the work site, when possible.
 - 4.4.13. Attend a 3 MDG professional staff meeting at least quarterly and brief on HPP goals as well as referral procedures.
- 4.5. Commanders and Supervisors at All Levels. All commanders and supervisors will:
 - 4.5.1. Permit sufficient time, as mission needs allow, for military and civilian personnel to participate in health screenings, fitness testing, physical conditioning, tobacco use cessation, stress management, nutrition, and cardiac risk reduction activities.
 - 4.5.2. Identify a health-conscious individual to act as the organization coordinator for HP activities and liaison to the Installation HPM.
 - 4.5.3. Act as role model to promote the practice of healthy lifestyle behaviors of subordinates in conjunction with the HPP objectives.

5. Concept of Operations:

5.1. Health Promotion. Health promotion is not a single discipline, but a comprehensive and coordinated effort. It involves knowledge from medical, nursing, dental, behavioral, environmental health, and other health-related disciplines to change and impact personal lifestyles and the related health status of individuals. Improved lifestyles will increase military readiness, individual productivity, and the quality of life while reducing health care expenditures. Close planning and cooperation between the line and medical components are essential to maximize program effectiveness.

5.2. Installation Health Promotion Working Group (IHPWG):

5.2.1. The IHPWG is composed of the 3 WG/CC (or designated alternate) as chairperson and representatives from the following installation agencies who have been appointed, in writing, by the chairperson in accordance with the recommendation of the chief or commander of the agency. 3 WG IHPWG:

5.2.1.1. Public Affairs (3 WG/PA).

5.2.1.2. Chaplain (3 WG/HC).

5.2.1.3. Social Actions (3 WG/SL).

5.2.1.4. Services Squadron (3 SVS).

5.2.1.5. Family Support Center (3 MSS/MSF).

5.2.1.6. Mental Health (3 MDOS/SGOH).

5.2.1.7. Nutritional Medicine(3 MDSS/SGF).

5.2.1.8. Installation Fitness Program Manager (IFPM)(3 AMDS/SGPZ).

5.2.1.9. Safety (3 WG/SE).

5.2.1.10. Family Advocacy (3 MDOS/SGOHF).

5.2.1.11. Health Promotion Medical Consultant (3 AMDS/SGP).

5.2.1.12. Defense Commissary Agency (DECA).

5.2.1.13. Civilian Personnel (3 MSS/DPCW).

5.2.1.14. Family Practice (3 MDOS/SGOEF).

5.2.2. The goal of the working group is to develop a HPP that encourages healthy lifestyles for the individual or group through awareness, risk assessment, intervention, and supporting environment. Ad hoc committees may be established to facilitate the implementation of HPP activities.

5.2.3. The working group meets quarterly. Members will attend all meetings or send an informed alternate to represent them if they are unable to attend. Minutes of these meetings are signed by the chairperson and maintained by the 3 MDG/SGPZ.

5.3. Quarterly Health Promotion Activities Report. This report is forwarded to HQ PACAF/SGP quarterly (March, June, September and December). It must include a statement of progress towards meeting PACAF HPP objectives, PACAF Fitness Program statistic graphs, copies of HPP Working Group minutes, and Tobacco Reduction Plan statistics (graphs). It may include community activities, newspaper or base bulletin articles, and initiatives to share with other HPMs.

5.4. Program Development. The Installation HPM and members of the installation HPP Working Group develop programs that meet the healthy lifestyle needs of the Elmendorf AFB community.

5.5. Command Support. The HPP is supported by the base through Commanders' Calls, base news-paper, television programs, base organizations, and any other avenues to disseminate health promotion information.

5.6. Civilian Community Resources. Civilian community resources such as programs sponsored by the "AMERICAN CANCER SOCIETY" (a trademark of the American Cancer Society), "AMERICAN DENTAL ASSOCIATION" (a trademark of the American Dental Association), "AMERICAN HEART ASSOCIATION" (a trademark of the American Heart Association), "AMERICAN RED CROSS" (a trademark of the American Red Cross), "ASYMCA" (a trademark of the ASYMCA), and the "AMERICAN LUNG ASSOCIATION" (a trademark of the American Lung Association) are used as available.

5.7. Community Needs Assessment. At least biennially, the installation HPM will conduct a survey of the Air Force community needs. This is to observe changes in the base population and design future health promotion efforts. The results are shared with other integrated delivery service (IDS) agencies and briefed at the IHPWG and IDS committee meeting.

5.8. Documentation Requirement. An audit trail must be available to verify encounters. The time devoted to health promotion by the health professional is coded under EBBH on the medical expense and performance report (MEPR).

5.9. Program Evaluation. HPP evaluation activities will include participant satisfaction and results of clinical, medical and screening tests while tracking participants' long-term behavioral outcomes.

6. Plans and Programs:

6.1. Parameters for Health Promotion Plans and Programs. Health promotion plans and programs will address tobacco-use prevention, reduction, and cessation, physical fitness, nutrition, stress management, alcohol and drug abuse, and early identification of cardiac and cancer risk factors. The Installation HPM works closely with various installation agencies to enhance the overall programs and prevent duplication. Medical personnel will be involved with these programs, especially in the areas of health care and health promotion.

6.1.1. Tobacco-use prevention, reduction, and cessation programs aim to create a social environment that supports abstinence and discourages use of tobacco products (including smokeless tobacco), create a healthy working environment, and provide smokers with encouragement and professional assistance to stop tobacco use (see AFI 40-102).

6.1.2. The installation HPM directs the Tobacco Cessation Program in accordance with AFI 40-101 and AFI 40-102. Data on tobacco use and 6 and 12 month follow-up from tobacco cessation classes is presented to the IHPWG. Individuals and groups interested in attending classes can contact the HPM at 552-2368.

6.2. Physical fitness program aims to encourage aerobic endurance, strength, and flexibility training in all target populations.

6.2.1. The Health Promotion Flight directs the Air Force Fitness Program per AFI 40-501. All active duty Air Force members are responsible for ensuring they have a fitness evaluation each

calendar year. The HPM monitors Cycle Ergometry testing program statistics and reports trends to 3 MDG/CC, 3 WG/CC and HQPACAF/SGP quarterly and annually.

6.2.2. Members that fail or invalidate the test should be retested within seven days and will have a retest no later than 30 days unless on mission essential duty, TDY, or leave. There is no acclimatization period for Elmendorf AFB. Contact the Installation Fitness Program Manager (IFPM) at 552-9959 for enrollment in self-directed, self-paced, and monitored fitness improvement programs.

6.3. Nutrition programs encourage and assist target populations to establish and maintain dietary habits contributing to good health, disease prevention, and weight control. Weight control involves both nutrition and exercise and is addressed in AFI 40-104.

6.3.1. The installation HPM should be aware of local resources available to provide nutritional advice. The HPM works closely with 3 WG/PA, base dining facilities, Officers' and noncommissioned officers (NCO) Clubs, AAFES, and DECA to coordinate nutritional promotion activities, especially concerning the Check It Out Program. The Services Representative to the IHPWG is responsible surveying all APF and NAF food/dining activities and reporting "Check It Out" statistics to the IHPWG per AFI 40-101.

6.3.2. Qualified professional dietitians provide nutritional advice for the Weight Management, Fitness, and Check It Out Programs. They direct clinical programs per AFI 40-104. Individuals interested in weight management and nutrition programs can contact 552-4014.

6.3.3. Stress management programs aim to reduce environmental stressors and help target populations to cope with stress. The Mental Health Flight in collaboration with the IDS committee directs stress management programs per AFI 40-101 and AFI 36-3009. The mental health representative will present current programs and enrollment statistics to the IHPWG. Individuals interested in stress management and other behavior modification programs can contact 552-8357 or 552-8165.

6.4. Alcohol and drug abuse prevention programs aim to inform the target population of the health hazards of substance abuse. Social Actions personnel and designated medical staff in conjunction with the HPM provide education and treatment for alcohol and drug abuse problems. The Mental Health representative will present available data to the IHPWG and IDS to plan and implement prevention activities. Contact the Drug Demand Reduction program at 552-9839 for more information on programs.

6.5. Cardiovascular, cancer, and health risk reduction programs identify early cardiac disease and cancer risk factors and provide information regarding lifestyle counseling and treatment referral where indicated. The Preventive Health Assessment (PHA) is for active duty members. Members will complete a Health Enrollment Assessment Review (HEAR) as part of the PHA.

6.5.1. The Installation HPM conducts public information campaigns emphasizing the dangers of cardiac and cancer risk factors and the importance of periodic hypertension screening and related self help areas such as diet, exercise, monitoring cholesterol, stress management, and tobacco-use cessation. IHPWG members are responsible for getting articles on their respective programs to the HPM for publishing and may be assigned to a subcommittee for planning annual campaigns (Great American Smokeout, Open House, and so forth). Contact the Health promotion Flight at 552-2368 for more information.

6.5.2. The Family Practice and Dental Clinics make hypertension screening readily available to the community and make referrals.

6.5.3. The HPM is responsible for gathering and presenting HEAR data to the IHPWG and IDS committee. Based on data analysis, worksite prevention programs will target units, groups, or individuals for intervention and education of modifiable health risks.

6.6. Promoting Health 2000. The entire HPP is based upon a positive attitude toward the Air Force, the community we serve, and the health and well-being of each individual. HPP Working Group functions must be carried out in a positive spirit for the HPP to succeed. With a positive attitude and spirit the Installation HPP Working Group will implement education and screening programs to target the community we serve.

6.7. Installation Health and Wellness Center (HAWC). The installation HAWC provides all HP activities in a unique convenient location for the community we serve.

JONATHAN S. GRATION, Colonel, USAF
Commander

Attachment 1

TERMS EXPLAINED

Terms

Health--A state of mental, physical, and social well-being, and not merely the absence of disease.

Health Promotion--Any combination of health education and related organizational, social, economic or health care intervention designed to facilitate behavioral and environmental alterations that will improve or protect health. It includes those activities intended to support and influence individuals in managing their own health through lifestyle decisions and self-care. Operationally, health promotion includes tobacco-use prevention and cessation, physical fitness, nutrition, stress management, alcohol and drug abuse prevention, and early identification of cardiac and cancer risk factors.

Lifestyle--The aggregated habits and behavior of individuals.

Self Care--Accepting responsibility for maintaining personal health and making medical or dental decisions which are appropriate for the individual to make.